

DECLARATION

Utility Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention **METHOD AND SYSTEM FOR MITIGATING DISTORTIVE EFFECTS IN BIOMETRIC SAMPLES IN A BIOMETRIC VERIFICATION SYSTEM** the specification of which

(Check One)

☒ is attached hereto OR
☐ was filed on _____ as United States Application Serial No. _____; PCT International Application No. _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Date of Filing	Priority Claimed	
			Yes	No

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date	Status-Patented, Pending or Abandoned

Residence, post office address, citizenship and signature of inventor(s) set forth beginning on next page.

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

201	FULL NAME OF INVENTOR	FIRST Name Dustin	MIDDLE Initial M.	LAST Name Davis	
	RESIDENCE & CITIZENSHIP	City Round Rock	State or Foreign Country Texas		Country of Citizenship United States
	POST OFFICE ADDRESS	3912 Orion Street	City Round Rock	State or Country Texas	Zip Code 78664
INVENTOR'S SIGNATURE _____ DATE _____					

202	FULL NAME OF INVENTOR	FIRST Name Jane	MIDDLE Initial R.	LAST Name Garrison	
	RESIDENCE & CITIZENSHIP	City Austin	State or Foreign Country Texas		Country of Citizenship United States
	POST OFFICE ADDRESS	4420 Secluded Hollow	City Austin	State or Country Texas	Zip Code 78727
INVENTOR'S SIGNATURE _____ DATE _____					

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:)
) Group Art Unit: To be assigned
Applicant: Davis, et al.)
) Examiner: To be assigned
Serial No.: To be assigned)
)
Filed: Herewith)
)
For: METHOD AND SYSTEM FOR)
MITIGATING DISTORTIVE EFFECTS IN)
BIOMETRIC SAMPLES IN A BIOMETRIC)
VERIFICATION SYSTEM)

GRANT OF POWER OF ATTORNEY

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

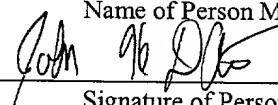
As assignee of record of an entire interest in the above-identified application, the undersigned hereby appoints as my attorney herein, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, John H. D'Antico, Reg. No. 45,917; Darryl J.

CERTIFICATE OF MAILING
(37 C.F.R. §1.10)

Upon reasonable basis and information and belief, I hereby certify, to the best of my knowledge, that this correspondence, including those papers, letters, or fees, if any, referred to as being attached, enclosed, or otherwise affixed hereto, is being deposited with the United States Postal Service on the date shown below with sufficient postage as 'Express Mail Post Office To Addressee' in an envelope addressed to the Commissioner for Patents, Washington, D.C. 20231.

EF062173995US
Express Mail Label No.

April 5, 2001
Date of Deposit

John H. D'Antico
Name of Person Mailing Paper

Signature of Person Mailing Paper

Adams, Reg. No. 41,424; Jose C. Villarreal, Reg. No. 43,969; Pierre Hubert, Reg. No. 45,826;
Jeffrey B. Plies, Reg. No. 46,999; Wayne M. Harding, Reg. No. 26,555; of Brobeck, Phleger &
Harrison LLP, 4801 Plaza on the Lake, Austin, Texas 78746; telephone (512) 330-4000.

Respectfully submitted,

BIOMETRIC ACCESS CORPORATION

Dated: _____

By: _____
Ronald R. Smith,
President / CEO

BIOMETRIC ACCESS CORPORATION
2555 North Interstate Highway 35
Suite 200
Round Rock, Tx 78664

Applicant or Patentee: Davis, et al.
Serial or Patent No.: Filed Herewith
Filed or Issued: To Be Assigned
For: **METHOD AND SYSTEM FOR MITIGATING DISTORTIVE EFFECTS IN BIOMETRIC SAMPLES IN A BIOMETRIC VERIFICATION SYSTEM**

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(d) and 1.27(c)) - SMALL BUSINESS CONCERN**

I hereby declare that I am:

 the owner of the small business concern identified below:
 X an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF CONCERN: Biometric Access Corporation
ADDRESS OF CONCERN: 2555 North Interstate Highway 35
Suite 200
Round Rock, TX 78664

I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third-party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention entitled **METHOD AND SYSTEM FOR MITIGATING DISTORTIVE EFFECTS IN BIOMETRIC SAMPLES IN A BIOMETRIC VERIFICATION SYSTEM** by inventors Garland R. Bullock and Paul V. Tischler described in

 X the specification filed herewith.
 application serial number _____, filed _____.
 Patent No. _____, issued _____.

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

**NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)*

NAME: Ronald R. Smith
ADDRESS: 2555 North Interstate Highway 35, Suite 200, Round Rock, TX 78664

☐ INDIVIDUAL ☒ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: Ronald R. Smith
TITLE OF PERSON IN ORGANIZATION: President / CEO
ADDRESS OF PERSON SIGNING: Biometric Access Corporation
2555 North Interstate Highway 35, Suite 200, Round Rock, TX 78664

Signature _____ Date _____